

CREW: 57 WORK ORDER TYPE: MODIFICATIONS

01-19846-10

ISSUE DATE 01/06/11

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Originator	: WILLIAM MORGAN	Schedule Date	:
Planner	: JIMMIE KNAPP	Priority	: 3A
Drawing No	:	Clearance	: NO
Equip No/Cat	: 2TGF--0 2	Tag Request	:
Project ID	:	Text ID	:
Shutdown	: N No Shutdown	Frequency	: NOT SCHEDULED
Ref No	:	Last Reading	: No Reading

Date Completed: _____ Failure Code: _____

Completed By : _____ Signature : _____

Accepted By : _____ Signature : _____

**** Delay Codes Legend ****

W=Whse C=CrSp T=Tag TL=Tool P=Plan
 ** Record Time Daily ** Delays

[illegible]

**** IMPORTANT NOTICE ****

YOU ARE RESPONSIBLE FOR YOUR OWN SAFETY AND MUST ENSURE THAT THE REQUIRED PPE IS WORN FOR EVERY JOB YOU ARE DOING. IF YOU HAVE ANY QUESTIONS CONCERNING THE WORK RULES, SAFETY CODES, OR REQUIRED PPE, PLEASE CONTACT YOUR SUPERVISOR.

Job Feedback/Historical Notes:



IP7_005517